U.S. Department of Labor :
Office of Labor-Management
Standards
Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 88 2

16021

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 | Through: |12 / 31 / 2004 |

3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Christopher	Name Tile Marble & Terrazzo B.A.C. Local # 7 of N.Y			
	Labor Organization File Number 540126			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 45-34 Court Square	Street 45-34 Court Square			
City Long Island City	City Long Island City			
State New York ZIP Code + 4 11101	State New York ZIP Code + 4 11101			
5. Position in labor organization. Field Representative				
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name Port Morris Tile & Marble Corp.	Dinner Celebration for 100 year anniversary was an invited guest			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street 1285 Oak Point Ave.	7.D. Arrivant.			
City Bronx	\$275			
State New York ZIP Code + 4 10474				
Signature				
	of Perjury and other applicable penalties of the law, that all of the information nying documents), has been examined by the signatory and is, to the best of the section on penalties in the instructions.)			
Signed Chi The Ary	On 7/31/2005 1-718-786-7648			
	Date Telephone Number			

Name of Person Filling Christopher Guy	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Colleran O'Hara & Mills L.L.P.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
Trade Name, if any:	a. Labor Organization b. Trust			
P.O. Box, Bldg., Room No., if any	c. Employer			
Street 1225 Franklin Ave.	C. Employer			
City Garden City				
State New York ZIP Code + 4 11530				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name	Golf Outting			
Trade Name, if any:	Legal COUNEIL			
P.O. Box, Bldg., Room No., if any	, -, -, -, -, -, -, -, -, -, -, -, -, -,			
Street	11.b. Approximate dollar value of such dealing. \$350			
City	12.a. Nature of interest held or income received.			
State ZIP Code + 4	Solf Outting & Sousener			
	12.b. Amount.			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing	Christopher	Guy
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File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).		9. Business deals with:
Name Colleran O'Hara & Mills L.L.P.		a. Labor Organization
Trade Name, if any:		A Table of gardenies.
P.O. Box, Bldg., Room No., if any Suite 450		i b. Trust
		c. Employer
Street 1225 Franklin Ave.		• '
City Garden City ZIP Code + 4 11530		
State New York	<u> </u>	11.a. Nature of such dealing.
10. If 9.b. or 9.c. is checked give trust or employer's name.		Christmas Party
Name		•
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		Legar Council
Street		200)
City	i i	
Only	1	
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$75
		12.a. Nature of interest held or income received.
		CHRISTMAS PARTY
		CHRIS
		12.b. Amount.